

FUNDING APPLICATION

Sexual Assault Core Services

July 1, 2010 - June 30, 2011

Due May 3, 2010



Office of Crime Victims Advocacy
Department of Commerce
906 Columbia Street SW
PO Box 48304
Olympia, Washington 98504-8304

Washington State
Department of Commerce
Office of Crime Victims Advocacy

Application For Funds Sexual Assault Core Services

Washington State FY 2011 (July 1, 2010- June 30, 2011)

APPLICATION DUE DATE: May 3, 2010

_____(agency name) is hereby applying for funding through the Department of Commerce to provide Sexual Assault Core Services for victims residing in _____ county/region.

CORE SERVICES GRANTEEES ARE REQUIRED TO PROVIDE ALL CORE SERVICES IN ACCORDANCE WITH THE WASHINGTON STATE SEXUAL ABUSE/ASSAULT SERVICES STANDARDS (ATTACHMENT A). REQUIRED CORE SERVICES ARE:

- Information, Referral and Awareness
- Crisis Intervention
- Legal Advocacy
- Medical Advocacy
- General Advocacy
- System Coordination
- Prevention: Community Development
- Prevention: Building Skills

The Washington State Sexual Abuse/Assault Services Standards specify the definition, goal, duration, eligible activities, potential recipients/participants and qualifications for providers for each core service. I certify that the agency has reviewed the requirements and will deliver core services in accordance with these standards.

The intent of direct core services is the provision of victim-centered services: specific, focused and driven by individuals impacted by sexual abuse and assault. I certify that victim-centered sexual assault advocacy services will be available, accessible and provided to victims and survivors.

Signature

Title

Please Print Name

Date

***An Agency Requesting Funding For Core Services
Must Meet The Following Criteria:***

- Is an accredited (full or provisional) Community Sexual Assault Program (CSAP);
- Has all of the required core services available for their region/county or identified population;
- Provides immediately available victim-centered 24-hour personal response for: Information, Referral and Awareness, Crisis Intervention, Legal Advocacy and Medical Advocacy Services;
- Has a written agreement with all other CSAPs in the same region that identifies which population (geographic or demographic) will be served by which CSAP (non-duplication of services) and how the core services funds will be allocated among the CSAPs (attach this agreement to this application);
- Provides or arranges for qualified interpretive and/or translation services to Limited English Speaking (LES)/Limited English Proficient (LEP) and/or hearing impaired/deaf persons;
- Reports suspected incidents of child abuse or neglect of a child or vulnerable adult in accordance with RCW 26.44.030 and 74.34.035;
- Initiates criminal history background checks pursuant to RCW 43.43.832 and 43.43.834, for all prospective employees, volunteers and subcontractors who may have unsupervised access to children or vulnerable adults;
- Utilizes volunteers in the agency's sexual assault program;
- Provides all core services by paid staff or volunteers of the CSAP (CSAPs may subcontract with other entities to provide prevention core services);
- Has all staff or volunteers receive initial Core Training specified in the Sexual Assault Service Standards (Attachment A) prior to providing direct services;
- Agrees that the 20% match required for the VOCA portion of Core Services funds will be met by the Washington State funded portion of the Core and Specialized Services Grant. If the Washington State portion of the grant is not sufficient to meet the VOCA match requirement, the agency agrees that local funds or in-kind will complete the match;
- Participates in statewide data collection using the InfoNet data system regarding clients served and services provided including quarterly submission of data for Information, Referral and

Awareness/Crisis Intervention Services, Client Intakes, Client Service Summaries and Prevention activities; and annual submission of the Community Development Year-end Report;

- Maintains compliance with all Core Training requirements specified in the Sexual Assault Service Standards (Attachment A) including both initial and ongoing training of core service providers;
- Will cooperate with and participate in evaluation activities conducted by the Office of Crime Victims Advocacy.

I certify that the agency named above meets all of these criteria.

Signature

Title

Please Print Name

Date

Sexual Abuse/Assault Service And Prevention Standards

The Washington State Sexual Assault Services Plan was adopted in 1995. In fiscal year 1997 the State of Washington Sexual Abuse/Assault Service Standards were implemented.

Sexual Assault Service Standards

The purpose of the Sexual Abuse/Assault Service Standards is to ensure that:

- 1) A continuum of essential services is available for victims, survivors and community members in every region in the state, and
- 2) Prevention activities are conducted in every region to assist communities in reducing and preventing sexual violence.

Each service standard indicates its intent and specifies the definition, the goal, the duration, eligible activities, service recipients, and the qualifications for providers for each service.

Direct core services should be delivered in a victim-centered manner that specifically meet(s) the goals and eligible activities of each standard. It is vital that all sexual assault staff clearly understand each element of every service standard to ensure services and prevention activities are conducted in accordance with the service standards. This will also ensure services are accurately documented and reported in InfoNet.

Understanding the Revised Core Standards

During the Spring of 2010, OCVA with guidance and feedback from workgroup participants from CSAPs, the Washington State Coalition of Sexual Assault Programs and the Washington State Department of Health updated the Sexual Assault Prevention Standards and the Information, Referral and Awareness Standard (formerly the Information and Referral Standard).

Why did we need to do this?

For 10 years providers across Washington State have been conducting prevention activities guided by the older standards. Since this time, the Centers for Disease Control and Prevention (CDC), the federal Rape Prevention and Education (RPE) program funder, has provided further direction on how these funds must be used. Also, in 2008 the CDC required, as a condition of RPE funding, that all states develop a statewide sexual violence prevention plan. To meet the CDC requirement, OCVA and the Department of Health conducted a process to review and update Washington's state plan.

Considerations we had to keep in mind:

Based on the guidance and recommendations from the federal funder (CDC) and the updated statewide plan there were some considerations we had to keep in mind during our review of the prevention standards:

1. Prevention activities must focus on primary prevention: approaches that take place before sexual violence has occurred to prevent initial perpetration or victimization.
2. Single presentations are useful for community education about sexual violence, but in isolation are not a sufficient prevention strategy.

3. Washington State is committed to using a community development approach to preventing sexual violence. Community development continues as a cornerstone in the updated state prevention plan and as a key prevention standard.

Community Development and Building Skills Standards:

Through this review the wording, but not the intention of the Building Skills and the Community Development (formerly known as Social Change) Standards changed.

Information, Referral and Awareness Standard:

Over the past couple of years OCVA has guided programs to see one-time presentations or presentations about agency services as System Coordination activities. Based on the review of the standards, OCVA determined that these types of contacts/activities/etc. fit better with the goal of a revised Information, Referral and Awareness Standard. As you will see as you review the standards, the description, activities, duration and recipients were expanded in the Information, Referral and Awareness Standard to include activities that are conducted to provide information about sexual abuse/assault such as, awareness raising activities, information to assist the community in understanding the services available to victims, or information that may help the community understand the impact of sexual assault.

Please refer to the chart on page 7 that outlines the revised standards along with examples of activities. These lists of examples are not exhaustive, but are there just to provide some guidance/ideas.

It is important that you and your staff understand the difference between prevention activities your agency conducts or is a part of and outreach/activities your agency engages in to provide sexual abuse/assault related information to your community.

Your program coordinator at OCVA is available to support you in applying the revised standards. Please call if you have any questions.

PREVENTION AND INFORMATION REFERRAL AND AWARENESS ACTIVITIES		
Prevention Services		Information, Referral and Awareness
Community Development	Building Skills	
<p>Goal: To change the norms, values, beliefs and attitudes that cause sexual violence through the shifting of ownership of solutions from social services to the community.</p> <p>Eligible Activities: Any primary prevention activities (aimed at prevention of sexual violence before it occurs) that are part of community development efforts.</p> <p>Community Development Process:</p> <ol style="list-style-type: none"> 1. Establishing relationships within communities, ensuring the inclusion of marginalized and underserved communities 2. Recruiting stakeholders from a chosen community 3. Asking: Why does sexual violence happen here? (A) 4. Asking: What would it be like without sexual violence? (B) 5. Developing a plan to get from A to B. 6. Asking: how will we know we are accomplishing anything? 7. Carrying out the plan. 8. Evaluation and revision. <p>Examples: For examples, see "Community Development and Sexual Violence Prevention" Training Package available through The Washington Coalition of Sexual Assault Programs (WCSAP).</p>	<p>Goal: To build skills and develop strategies within the community to prevent sexual abuse/assault.</p> <p>Eligible Activities: Any primary prevention activities (aimed at prevention of sexual violence before it occurs) that are part of building skills efforts. Activities should be consistent with the elements of the Nine Principles of Effective Prevention.</p> <ul style="list-style-type: none"> ■ A multisession program or set of activities that: <ul style="list-style-type: none"> ■ Enhance personal safety skills ■ Promotes nonviolent behavior ■ Enhance bystander intervention skills ■ Addresses topics logically connected with sexual assault prevention (such as communication, trust, gender, boundaries, respect, building assets, social norms); or ■ Prevention activities aimed at a specific community or institution that reach more than one level of the social-ecological model: <p><u>Individual:</u> activities aimed at changing or influencing attitudes and beliefs.</p> <p><u>Relationship:</u> activities aimed at influencing how people relate with their peers, families or intimate partners.</p> <p><u>Community:</u> activities aimed at influencing culture, systems and policies in a given setting.</p> <p><u>Society:</u> activities aimed at influencing larger macro-level factors such as gender inequality, religious beliefs, cultural beliefs system, societal norms, etc.</p> <p>Examples:</p> <ul style="list-style-type: none"> ■ Sponsor lunch time youth group meetings with 6th graders on how to interrupt sexual harassment to change the school climate regarding sexual violence. ■ Provide a workshop series for the Parent Teacher Association on teaching children healthy boundary setting and personal safety. ■ Work with a junior high school class to create and distribute a poster that promotes healthy respectful social interactions. ■ Provide a series of three 1-hour presentations to a high school health class on healthy sexuality and healthy relationships. ■ Assisting an organization to develop policies for a workplace free of sexual violence. 	<p>Goal: To provide sexual abuse/assault related information and resources.</p> <p>Eligible Activities:</p> <ul style="list-style-type: none"> ■ Assist individuals in evaluating what is needed including available and appropriate services and/or resources. ■ Provide information verbally or in writing about: ■ Available Services (including advocacy services provided by the CSAP) ■ Referrals to appropriate and relevant resources addressing individuals' needs ■ Information regarding sexual abuse/assault <p>Examples:</p> <ul style="list-style-type: none"> ■ Answer phone call about available services. ■ Provide a 45-minute presentation to the local Kiwanis Club about agency services. ■ Distribute flyers about advocacy services to all social services providers in your region. ■ Host a community event about sexual violence awareness. ■ Host a sexual assault awareness table at a county fair distributing brochures of agency services. ■ Answer a call from a student that has a question about sexual assault for a paper they are writing. ■ Provide a 1-hour presentation at the high school on sexual assault awareness.

Agency/Organization Information Form

All information is required.

Agency/Organization Name: []		Agency Accounting Period: (Ex: Jan – Dec; Jul – Jun) []	
Address: []		Did you expend \$500,000 or more in federal funds during your past fiscal year? <input type="checkbox"/> YES <input type="checkbox"/> NO	
		Did your agency expend \$100,000 or more of state funds during your past fiscal year? <input type="checkbox"/> YES <input type="checkbox"/> NO	
City:		State:	ZIP:
Applicant is: <input type="checkbox"/> Local Government <input type="checkbox"/> Federally Recognized Tribe <input type="checkbox"/> Non-profit Organization <input type="checkbox"/> Tribal Organization (refer to Definition of Terms)			
Mailing address (if different than above):			
City:		State:	ZIP:
Phone:	Fax:		E-mail:
Primary Contact Person – and Job Title		Fiscal or Secondary Contact:	
Primary Contact’s Phone:		Fiscal or Secondary Contact’s Phone:	
Primary Contact’s E-mail:		Fiscal or Secondary Contact’s E-mail:	
Federal employer identification number:		Washington State tax registration number (UBI# if applicable):	

Agency/Organization Information Form

continued

1) Indicate if each facility from which the grantee will carry out the project's scope of work complies with the requirements set forth for accessibility by the Americans with Disabilities Act. If the facility currently does not meet those requirements, how will you accommodate individuals with disabilities who request services?

2) Please provide a description of how your agency or program provides or arranges for qualified interpretive and/or translation services to Limited English Speaking (LES)/Limited English Proficient (LEP) and/or hearing impaired/deaf persons. Please use the space below. If more space is needed, please attach your description to this application. Descriptions must be limited to one page.

Prevention Activities

Federal Rape Prevention and Education (RPE) dollars are used to fund CSAP core prevention activities. RPE funding mandates that activities be focused on primary prevention of sexual assault. The goal of sexual assault primary prevention programs is to influence individuals and communities before a sexual assault occurs.

The two required Core Prevention Standards are:

- Community Development
- Building Skills

Based on these two required Core Prevention Standards, describe your agency's plan for prevention activities for Fiscal Year 2011. Please limit your response to one page or less. Please include:

- 1) The community you intend to work with on *Community Development* and what stage of the process you are at, and**
- 2) A description of the *Building Skills* activities you plan to conduct. Include in your description an example of one of the nine prevention principles listed below.**

Please remember:

- A. Prevention activities paid for through your prevention budget and reported as a prevention activity through Infonet must be a primary prevention activity. For example, efforts could range from preventing first-time perpetration to changing societal norms to decreasing rape supportive attitudes.
- B. The salaries and benefits portion of your prevention budget should reflect the amount of staff time dedicated to implement these prevention activities. *For example, Suzi works for Agency ABC full-time. 25% of Suzi's salary is paid through the minimum prevention budget. Therefore, on average, Suzi should spend 10 hours/week (full time employment 40 hours x 25%= 10 hours) on the prevention activities outlined in your plan.*

Maury Nation's Principles of Effective Prevention Programs¹:

- 1. Comprehensive:** Strategies should include multiple components and affect multiple settings.
- 2. Varied Teaching Methods:** Strategies should include multiple teaching methods, including some type of active, skills-based component.
- 3. Sufficient Dosage:** Participants need to be exposed to enough of the activity for it to have an effect.

¹ Nation, M., Crusto, C., Wandersman, A., Kumpfer, K.L., Seybolt, D., Morrissey-Kane, E., & Davino, K. (2003). *What Works in Prevention: Principles of Effective Prevention Programs*. American Psychologist, 58, 449-456. Prepared for the Centers for Disease Control and Prevention.

4. **Theory Driven:** Create prevention strategies based on promising practice, best practice and/or logical rationale.
5. **Positive Relationships:** Create programs that foster strong, stable, positive relationships between children and adults.
6. **Appropriately Timed:** Introduce program activities at the "right" developmental stage. The goal is to maximize the opportunity of significantly influencing a participant's life.
7. **Socio-Culturally Relevant:** Design programs to be appropriate for specific cultural beliefs and practices of specific groups as well as local community norms.
8. **Outcome Evaluation:** A systematic outcome evaluation is necessary to determine whether a program or strategy worked.
9. **Well-Trained Staff:** Staff members who are sensitive, competent, and have received sufficient training, support, and supervision should implement programs.

Attachment A

*Washington State
Department of Commerce
Office of Crime Victims Advocacy*

State of Washington Sexual Abuse/Assault Services Standards

FOR

Core Services for Community Sexual Assault Programs (CSAPs)

*Information, Referral and Awareness
Crisis Intervention
General Advocacy
Legal Advocacy
Medical Advocacy
System Coordination
Prevention: Community Development
Prevention: Building Skills*

INFORMATION, REFERRAL and AWARENESS	
Definition	<p>This standard has two purposes:</p> <ul style="list-style-type: none"> ■ Responding 24 hours a day in person or by phone to direct requests for information or assistance related to sexual abuse/assault and available services. ■ Conducting community awareness activities related to sexual abuse/assault and available services to the community at-large.
Goal	To provide sexual abuse/assault related information and resources.
Duration	Information and referral contacts are usually one-time. Awareness activities are usually one-time, but may reoccur.
Activities	<ul style="list-style-type: none"> ■ Assist individuals in evaluating what is needed including available and appropriate services and/or resources. ■ Provide information verbally or in writing such as: <ul style="list-style-type: none"> ▪ Available services (including advocacy services provided by the CSAP) ▪ Referrals to appropriate and relevant resources addressing individuals' needs ▪ Information regarding sexual abuse/assault <p>Information may be provided through:</p> <ul style="list-style-type: none"> ▪ Individual contact ▪ Outreach to underserved communities ▪ Distribution of Materials ▪ Public Speaking/Presentations ▪ Community Education Events
Recipients	<p>Any community members such as:</p> <ul style="list-style-type: none"> ■ Non-offending parents of child victims ■ Victims/Survivors ■ Significant others who require assistance in order to address their own reactions to the victimization and to effectively support the victim ■ Those whose work brings them into contact with people who have been victimized: health care, mental health, education, law enforcement, legal, social service personnel ■ Community groups ■ Marginalized and Native American communities ■ General community
Qualifications	<p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (both the curriculum and the trainer). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.</p> <p>Providers must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience.</p>

March 2010

CRISIS INTERVENTION	
Definition	An immediately available 24-hour personal response provided in a variety of settings to an individual presenting a crisis related to sexual abuse/assault.
Goal	To alleviate acute distress of sexual abuse/assault, to begin stabilization, and assist in determining the next steps.
Duration	Short term. May be episodic.
Activities	<p>Activities to alleviate acute stress including:</p> <ul style="list-style-type: none"> ■ Information about the effects of victimization ■ General information about medical and legal issues (Case specific information – see Legal/Medical Advocacy) ■ Information on services available in the community
Service Recipients	<ul style="list-style-type: none"> ■ Child sexual abuse/assault victims ■ Adult or adolescent sexual abuse/assault victims ■ Non-offending parents whose children are sexual abuse/assault victims ■ Significant others who require help/assistance in order to address their own reactions to the victimization and to effectively support the victim
Qualifications	<p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training, which must include at least four hours of crisis intervention, plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (both the curriculum and the trainer). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.</p> <p>Providers must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience.</p>

March 1999

GENERAL ADVOCACY	
Definition	Personal support and/or assistance in accessing sexual abuse/assault related services.
Goal	To ensure needed services and adequate support to enhance recovery from sexual abuse/assault
Duration	Generally, 1 to 4 times per month; 3 months to a year
Activities	<p>All activities and services are client-focused and case specific.</p> <ul style="list-style-type: none"> ■ Ongoing personal support, including outreach calls/visits (including in-patient or residential care settings) ■ Practical help as needed; information and referrals which are case specific and client focused ■ Ongoing, repetitive crisis intervention ■ Arranging for services to enhance recovery (e.g., health, financial, housing) ■ Consulting with others (such as CPS, APS, Indian Child Welfare) regarding an individual case
Service Recipients	<ul style="list-style-type: none"> ■ Adult/adolescent sexual abuse/assault victims ■ Non-offending parents whose children are sexual abuse/assault victims ■ Significant others who require help/assistance in order to address their own reactions to the victimization and to effectively support the victim
Qualifications	<p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training, plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (both the curriculum and the trainer). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.</p> <p>Providers must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience.</p>

March 1999

LEGAL ADVOCACY	
Definition	Acting on behalf of and in support of victims of sexual abuse/assault on a 24-hour basis to ensure their interests are represented and their rights upheld.
Goal	To assist gaining knowledge of the criminal justice system, gain access to all avenues of participation in the legal system and to promote the responsiveness of individual legal system participants.
Duration	Up to several years
Activities	<p>All activities and services are client-focused and case specific. For general information regarding legal advocacy, see Information & Referral.</p> <ul style="list-style-type: none"> ■ Assistance in making informed decisions about police reporting and the preparations needed, including the possibility of CVC benefits ■ Information about the criminal justice systems, civil remedies, and Dependency, Family and Juvenile Courts, including follow-up ■ Support at interviews, trial and sentencing ■ Assistance in preparing for court; informing the victim of her/his rights in legal settings ■ Active monitoring of case through the legal system ■ Assistance with protective/no-contact/anti-harassment orders
Service Recipients	<ul style="list-style-type: none"> ■ Child sexual abuse/assault victims ■ Adult/adolescent sexual abuse/assault victims ■ Non-offending parents whose children are sexual abuse/assault victims ■ Significant others who require help/assistance in order to address their own reactions to the victimization and to effectively support the victim
Qualifications	<p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training, which must include at least four hours of legal advocacy, plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (both the curriculum and the trainer). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.</p> <p>Providers must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience.</p>

March 1999

MEDICAL ADVOCACY	
Definition	Acting on behalf of and in support of victims of sexual abuse/assault on a 24-hour basis to ensure their interests are represented and their rights upheld.
Goal	To assist the victim to regain personal power and control as s/he makes decisions regarding medical care and to promote an appropriate response from individual service providers.
Duration	May vary significantly depending upon client's medical needs as related to the sexual assault.
Activities	<p>All activities and services are client-focused and case specific. For general information regarding medical advocacy, see Information & Referral.</p> <ul style="list-style-type: none"> ■ Assistance in making informed decisions about medical care and the preparations needed, including referral for possible forensic exam ■ Information about medical care/concerns, including assistance with needed follow-up ■ Support at medical exams and appointments ■ Information and/or assistance with Crime Victim Compensation applications
Service Recipients	<ul style="list-style-type: none"> ■ Child sexual abuse/assault victims ■ Adult/adolescent sexual abuse/assault victims ■ Non-offending parents whose children are sexual abuse/assault victims ■ Significant others who require help/assistance in order to address their own reactions to the victimization and to effectively support the victim
Qualifications	<p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training, which must include at least four hours of medical advocacy, plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (both the curriculum and the trainer). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.</p> <p>Providers must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience.</p>

March 1999

SYSTEM COORDINATION	
Definition	Coordination of the service system entails the development of working relationships and agreements (formal and informal) among programs and services with a role in the array of sexual abuse/assault service provision with the goal of improving service delivery
Goal	To operate a permanent, client-centered system which offers, or assures access to, a comprehensive continuum of specialized sexual abuse/assault services, which is mutually accountable despite individual changes over time in regulations, procedures or people who provide service.
Duration	An on-going process
Eligible Activities	<ul style="list-style-type: none"> ■ Develop partnerships ■ Increase collaboration ■ Assess gaps in service ■ Foster cooperation ■ Develop accountability process ■ Develop new ways of delivering services
Potential Participants	<ul style="list-style-type: none"> ■ Law enforcement ■ Prosecutors ■ Judiciary ■ Child Protective Services (CPS) ■ Schools ■ Social services (private and public) ■ Mental health services ■ Medical facilities/practitioners ■ Emergency services ■ Other relevant groups, task forces, networks and individuals
Qualifications	<p>System coordination should be initiated and led by a Community Sexual Assault Program.</p> <p>The staff and volunteers representing the Community Sexual Assault Program should represent the issues of sexual abuse/assault to the community accurately, fairly and regularly. They should understand the public policy-making process, build coalitions and articulate opinion to shape public policies that are beneficial for the organization and victims of sexual abuse/assault.</p> <p>They should commit to building community around sexual abuse/assault issues; promote effective relations among diverse agencies working with victims of sexual abuse/assault; facilitate cooperation between all of the agencies/organizations involved with victims of sexual abuse/assault.</p> <p>They also should encourage cooperation and collaboration with other organizations, seeking ways to improve services and/or reduce costs through cooperative efforts; share expertise with others to achieve partnerships; and organize and operate partnerships effectively.</p>

March 1999

PREVENTION: COMMUNITY DEVELOPMENT	
Definition	Promoting attitudes, behaviors and social conditions that will reduce and ultimately eliminate factors that cause or contribute to sexual violence. ¹
Goal	To change the norms, values, beliefs and attitudes that cause sexual violence through the shifting of ownership of solutions from social services to the community. ²
Duration	Varies with activities and opportunities. Complete projects may take more than one year.
Activities	<p>Any primary prevention activities (aimed at prevention of sexual violence before it occurs) that are part of community development efforts.</p> <p>Community Development Process:</p> <ol style="list-style-type: none"> 1. Establishing relationships within communities, ensuring the inclusion of marginalized and underserved communities 2. Recruiting stakeholders from a chosen community 3. Asking: Why does sexual violence happen here? (A) 4. Asking: What would it be like without sexual violence? (B) 5. Developing a plan to get from A to B. 6. Asking: how will we know we are accomplishing anything? 7. Carrying out the plan. 8. Evaluation and revision.
Participants	Stakeholders, Community ³
Qualifications	<p>Social change efforts should be initiated and led by a Community Sexual Assault Program.</p> <p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training, and the 5-hour WCSAP prevention orientation. 12 hours of on-going training is required annually. All training must be approved by the Washington Coalition of Sexual Assault Programs. The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault. Providers must have an understanding of the causes of sexual violence, prevention and social change theory, community development techniques and have demonstrated experience in educational techniques appropriate to their audience.</p> <p>Providers must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and the 5-hour prevention orientation, and has two years of relevant experience. The supervisor should observe the provider's training on a periodic basis.</p>

March 2010

¹ Sexual violence is physical, emotional, social economic, cultural, spiritual and/or political acts and/or behaviors that use sex and/or sexuality as tools of violence and oppression against children, youth, women and men

² Revised goal from the updated Washington State Prevention Plan 2009.

³ A community is any definable group of people who share concerns or interests.

PREVENTION: BUILDING SKILLS	
Definition	Programs and presentations focused on building skills within the community to prevent sexual abuse/assault.
Goal	To build skills and develop strategies within the community to prevent sexual abuse/assault.
Duration	Varies with activities and opportunities.
Activities	<p>Any primary prevention activities (aimed at prevention of sexual violence before it occurs) that are part of building skills efforts. Activities should be consistent with the elements of the Nine Principles of Effective Prevention.¹</p> <ul style="list-style-type: none"> ■ A multisession program or set of activities that: <ul style="list-style-type: none"> ■ Enhance personal safety skills ■ Promote nonviolent behavior ■ Enhance bystander intervention skills ■ Addresses topics logically connected with sexual assault prevention (such as communication, trust, gender, boundaries, respect, building assets, social norms); or ■ Prevention activities aimed at a specific community or institution that reach more than one level of the social-ecological model:² <p><u>Individual</u>: activities aimed at changing or influencing attitudes and beliefs.</p> <p><u>Relationship</u>: activities aimed at influencing how people relate with their peers, families or intimate partners.</p> <p><u>Community</u>: activities aimed at influencing culture, systems and policies in a given setting.</p> <p><u>Society</u>: activities aimed at influencing larger macro-level factors such as gender inequality, religious beliefs, cultural beliefs system, societal norms, etc.</p>
Participants	<p>Individuals and groups in the general community such as:</p> <ul style="list-style-type: none"> ■ Children ■ Teens ■ Parents/ Caregivers ■ Community members ■ Service providers
Qualifications	<p>Prevention efforts are best provided by, or under the auspices of, a Community Sexual Assault Program.</p> <p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training, and the 5-hour WCSAP prevention orientation. 12 hours of on-going training is required annually. All training must be approved by the Washington Coalition of Sexual Assault Programs. The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault. Providers must have an understanding of the causes of sexual violence, prevention and social change theory, community development techniques and have demonstrated experience in educational techniques appropriate to their audience. Providers must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and the 5-hour prevention orientation, and has two years of relevant experience. The supervisor should observe the provider's training on a periodic basis.</p>

March 2010

¹ Nation, M., Crusto, C., Wandersman, A., Kumpfer, K. L., Seybolt, D., Morrissey-Kane, E., & Davino, K. (2003). **What works in prevention: Principles of Effective Prevention Programs.** *American Psychologist*, 58, 449-456.

² Levels of influence from the Social Ecological Model of Prevention, (National Center for Injury Prevention and Control, Centers for Disease Control and Prevention).

Attachment B

Proposed Annual Budget

(Limit the response to Budget Forms and two pages for Budget Justification)

Outline your Fiscal Year 2011 proposed budget (July 1, 2010 through June 30, 2011) on the Fiscal Year 2011 Budget Worksheet (Attachment B). You should develop your budget based on your current core services grant award. We will send you updated funding information when state and federal funding amounts are finalized.

The budget is divided into five categories. Under each section provide a breakdown within the category that specifies the individual cost per item. For example, within “Salaries” list the names of staff members assigned to this project, their position title, the percentage of their salary that this contract will fund, and the total amount you are requesting for their salary.

1. **Minimum Prevention** is the portion of core funding that **must** be used for Prevention activities. **Additional Prevention** would represent any additional Core Service funding you wish to allocate to prevention activities. If the Applicant intends to supplement Minimum Prevention with Other Core Services funding, this should be indicated in the “Additional Prevention” column. Please specify the amount on the Budget Worksheet, and describe and list the activities the Additional Prevention funds will support. Please remember that any funds designated as “Additional Prevention” are still Core funding and should be billed to OCVA within the Core Services category, not to the Minimum Prevention category. Note: Core grantees who designate “Additional Prevention” funds will need to identify and track those costs during the fiscal year within other Core Services billings. A-19 voucher forms will require that you bill these costs separate from other Core Services costs.
2. The Applicant may include up to fifteen percent (15%) for Indirect/Overhead costs. On the Budget Worksheet, provide the computations of how the percentage of shared overhead costs was calculated and describe and list the costs included in the Indirect/Overhead amount. The percentage charged should be consistent with the agency’s cost allocation plan. Indirect/Overhead costs of 15% should not automatically be charged. The Applicant may charge Indirect/Overhead costs under the categories of Additional Prevention Total and Other Core Services Total. **Applicants may not charge Indirect/Overhead costs to the Minimum Prevention funding.**
3. Provide a computation for **EACH line item** listed in the budget. Indicate how you arrived at your costs for each item in the budgets for Core, Additional Prevention and Minimum Prevention services. Below the budget worksheet there is additional space to describe and list the activities associated with the costs you have reflected in your budget. Attach an additional page if needed to provide complete information. For example:

Name/Position	Computation (annual salary rate and percentage of time charged to services)	Cost for Other Core Services	Cost for Additional Prevention	Cost for Minimum Prevention
(sample)	(sample)	(sample)	(sample)	(sample)
Jane Doe/Advocate and Prevention Educator	\$30,000 x 55% (.55 FTE), \$30,000 X 45% (.45 FTE)	\$16,500	\$8,100	\$5,400

Space is provided under the budget worksheet to describe activities of staff listed in the salaries line item.

Example: Full time position of which 55% of time is dedicated to advocacy services and 45% of time is dedicated to prevention activities.

Item Description	Computation	Cost for Other Core Services	Cost for Additional Prevention	Cost for Minimum Prevention
(sample)	(sample)	(sample)		
Cell phone service for advocates	\$65/month x 12 months = \$780	\$780		

Describe the costs listed above and list activities associated with these items. Attach a separate sheet if needed to provide complete information.

Example: Cell phones are used by advocates during travel to outlying areas and responding to victims of sexual assault/abuse.

Budget Terms and Definitions:

Salaries: The costs of paying staff salaries to:

- provide direct services to clients,
- supervise employees who are providing direct services, and
- for support staff such as a bookkeeper or receptionist (this can also go into Indirect Overhead, see the Indirect/Overhead section below).

Benefits: The costs of paying payroll taxes, insurance and other fringe benefits of staff listed in the Salaries category.

Subcontracts: For prevention activities only – the cost to pay individuals and/or companies to provide subcontracted services. Core Services cannot be subcontracted. Grant costs must be explained in the budget (see sample on the budget).

Example: This is a subcontract with ABC organization to provide two prevention activities using theater to elementary youth. Cost is approximately \$2,500.

Goods and Services: Goods and services must be related to the provision of Core and Prevention services. Only those costs, such as supplies, utilities, rent, professional liability insurance, travel and telephone that are incurred providing Core and Prevention services can be included here. Costs related to general administration or services other than Core and Prevention need to be allocated accordingly. Attach an additional page, if needed, to provide complete information.

For example, one way of budgeting shared Goods and Services costs is by using the percentage of FTEs (Full-Time Equivalencies) method.

There are 2 staff, Mary and Anita, who will both spend 50% of their time providing services for your OCVA sexual assault contract, which equals a total of 1.0 FTE. Let's say the agency has 3 other employees who do not provide sexual assault services but whose combined % FTE equals 3.0. In this case, expenses that are 'shared,' such as rent and utilities, would be split 25:75.

If the rent is \$650 a month, multiply it by 12 months (which is the length of the contract year) and then multiply it by 25%. Calculate the phone bill, utilities, and other "shared" expenses the same way.

Direct Goods and Services costs are those that are specific to the OCVA sexual assault grant.

If you must travel to assist sexual assault clients, conduct outreach or attend trainings as part of your OCVA sexual assault grant, the total cost of travel would be charged to the OCVA sexual assault grant.

Travel expenses incurred or paid by the grantee shall be reimbursed at a rate not to exceed the current state rate and in accordance with the State of Washington Office of Financial Management Travel Regulations. Current rates for travel may be accessed at <http://www.ofm.wa.gov/resources/travel/colormap.pdf>.

Indirect/Overhead: This may include both facilities and administrative costs of running your organization. Administrative and facilities costs could include costs such as audits, building maintenance, janitorial services, and costs of paying for the salaries and benefits of an executive director, accountant, computer specialist, and a portion of the associated office costs for these staff. Mortgage payments and other costs associated with building ownership are also considered indirect/overhead costs.

Audit Costs: Agencies that are subject to A-133 audit requirements may allocate a pro-rated portion of audit costs to the goods and services portion of the budget. For agencies not subject to A-133 audit requirements, audit costs must be allocated to indirect/overhead.

BUDGET DETAIL WORKSHEET

FY 2011 Core Sexual Assault Services Funding Application

Agency Name: _____

Please complete the proposed budget worksheets. Round all costs to the nearest dollar. Not all categories may be applicable to your budget.

Salaries - List each position to be paid with Core and Prevention funds by title and name of employee, if available. Show the annual salary rate and the percentage of time to be devoted to Core and Prevention. Salaries may include individuals providing direct services.

Name/Position	Computation (<u>annual salary rate</u> and percentage of time charged to services)	Cost for Other Core Services	Cost for Additional Prevention	Cost for Minimum Prevention
<i>(sample)</i>	<i>(sample)</i>	<i>(Sample)</i>	<i>(Sample)</i>	<i>(Sample)</i>
Jane/Doe/Advocate and Prevention Educator	$\$30,000 \times 55\% (.55 \text{ FTE})$ $\$30,000 \times 45\% (.45 \text{ FTE})$	\$16,500	\$8,100	\$5,400
TOTAL SALARIES				

List activities associated with all positions above. *Example: Full time position of which 55% of time is dedicated to advocacy services and 45% is dedicated to Prevention Services.*

BUDGET DETAIL WORKSHEET

FY 2011 Core Sexual Assault Services Funding Application

Agency Name: _____

Benefits – Must be for the personnel named in salaries. Benefits should be based on actual known costs or an established formula. Benefits should only be for the percentage of time devoted to these services. Only the allowable portion of costs such as employer payroll taxes, insurance, and other fringe benefits for personnel listed above may be included in this category.

Benefit Description for Name/Position	Computation	Cost for Other Core Services	Cost for Additional Prevention	Cost for Minimum Prevention
<i>(Sample) Medical for Jane Doe/Advocate and Prevention Educator</i>	<i>(Sample) \$10,000 x 100% (1 FTE)</i>	<i>(Sample) \$5,500</i>	<i>(Sample) \$2,700</i>	<i>(Sample) \$1,800</i>
TOTAL BENEFITS				

List details associated with all benefits listed above:

Example: Full time position of which 100% of medical benefits are paid for through SA funds.

BUDGET DETAIL WORKSHEET

FY 2011 Core Sexual Assault Services Funding Application

Agency Name: _____

Subcontracted Services and Consultant Fees: For Prevention activities only. List subcontractors needed to provide services.

Subcontracted Service/Consultant	Computation	Cost for Other Core Services	Cost for Additional Prevention	Cost for Minimum Prevention
<i>(Sample) Jenny Doe Interpreter for Prevention Training</i>	<i>(Sample) 8 hours of interpretation @ \$35/hr</i>	<i>Cannot subcontract these services</i>		<i>(Sample) \$280</i>
TOTAL SUBCONTRACTED SERVICES				

Provide a description of the services that will be performed by subcontractors, trainers, and speakers.

Example: Subcontract with ASL interpreters at Prevention Trainings.

BUDGET DETAIL WORKSHEET

FY 2011 Core Sexual Assault Services Funding Application

Agency Name: _____

Goods and Services: Goods and services must be related to the provision of Core and Prevention services. Only those costs, such as supplies, utilities, rent, professional liability insurance, travel and telephone that are incurred providing Core and Prevention services can be included here. Costs related to general administration or services other than Core and Prevention need to be allocated accordingly. Attach an additional page, if needed, to provide complete information.

Item Description	Computation	Cost for Other Core Services	Cost for Additional Prevention	Cost for Minimum Prevention
<i>(sample)</i> Cell Phone for Advocates	<i>(sample)</i> \$65/month x 12 months	<i>(sample)</i> \$780	<i>(sample)</i>	<i>(sample)</i>
TOTAL GOODS AND SERVICES				

Describe the costs above and list activities associated with these items. Attach separate pages as needed. *Example: Advocates use cell phones during travel to outlying areas and responding to victims of sexual assault.*

BUDGET DETAIL WORKSHEET

FY 2011 Core Sexual Assault Services Funding Application

Agency Name: _____

Indirect Overhead: This may include both facilities and administrative costs of running your organization. Administrative and facilities costs could include costs such as audits, building maintenance, janitorial services, and costs of paying for the salaries and benefits of an executive director, accountant, computer specialist, and a portion of the associated office costs for these staff. Mortgage payments and other costs associated with building ownership are also considered indirect/overhead costs. You can include no more than 15% of your total budget amount requested for Indirect/Overhead costs. No more than 15% of the Additional Prevention total and 15% of the Other Core Services Total may be charged. Indirect/Overhead may not be charged to Minimum Prevention.

Name/Position OR Item Description	Computation	Cost for Other Core Services	Cost for Additional Prevention	Cost for Minimum Prevention
<i>(sample) Jessie Doe Executive Director</i>	<i>(sample) 15%/month of Executive Director's time x 12 months</i>	<i>(sample) \$10,100</i>	<i>(sample) \$1,200</i>	
TOTAL INDIRECT OVERHEAD				

Describe the costs listed above and list activities associated with these items.

Example: Time associated with Executive Director to oversee and manage the contract.

BUDGET DETAIL WORKSHEET SUMMARY

FY 2011 Core Sexual Assault Services Funding Application

Agency Name: _____

Budget Summary - When you have completed the budget detail worksheets, transfer the totals for each category to the spaces below.

<u>Budget Categories</u>	<u>Core Services Amount</u>	<u>Additional Prevention Amount</u>	<u>Minimum Prevention Amount</u>
Salaries	\$	\$	\$
Benefits	\$	\$	\$
Subcontracted Services		\$	\$
Goods & Services	\$	\$	\$
Indirect Overhead	\$	\$	
Total Grant Amount	\$	\$	\$

BUDGET DETAIL WORKSHEET

FY 2011 Core Sexual Assault Services Funding Application

Agency Name: _____

Budget Adds - In **priority** order, identify what should be added to your proposed grant budget should additional dollars be available. Total adds should equal, or be close to, a maximum of \$5,000. Provide ALL the information requested.

Line Item Category and Item Description	Computation	Amount
<i>(sample)</i> <i>Printing Costs for Updated Brochures</i>	<i>(sample)</i> <i>1200 x \$0.45</i>	<i>(sample)</i> <i>\$540</i>
TOTAL ADD AMOUNT		

Provide a description of the expenses to be added to your proposed budget.

BUDGET DETAIL WORKSHEET

FY 2011 Core Sexual Assault Services Funding

Agency Name: _____

Budget Cuts - In **priority** order, identify what should be cut from your proposed grant budget should fewer dollars be available. Total cuts should equal, or be close to, a maximum of \$5,000. Provide ALL the information requested.

Line Item Category and Item Description	Computation	Amount
<i>(sample)</i> <i>Printing Costs for Updated Brochures</i>	<i>(sample)</i> <i>1200 x \$0.45</i>	<i>(sample)</i> <i>\$540</i>
TOTAL CUT AMOUNT		

ATTACHMENTS C-E

Federal Forms

Attachment C - Subgrant Award Report –NEW QUESTIONS TO ANSWER

Please provide the information specified in boxes: 1 (a-please include zip code + the 4 digit suffix, b, c), 3, 6, 7 (a, b) and 9 ONLY. This form is part of the yearly VOCA report that OCVA submits on your behalf.

Attachment D - Certification of Non-Supplanting

All agencies must complete and return this attachment to be eligible for funding.

Attachment E - Equal Employment Opportunity Plan (EEOP) Certification

All agencies must complete and return this attachment to be eligible for funding.

These forms must be filled in by hand or typed, and they are not available electronically.

Return this application and attachments (Attachments B – E) by May 3, 2010 to:

**Stephanie Condon
Sexual Assault Services Program Manager
Office of Crime Victims Advocacy
Washington State Department of Commerce
906 Columbia St. SW
PO Box 48304
Olympia, WA 98504-8304**

	U.S. DEPARTMENT OF JUSTICE OFFICE OF JUSTICE PROGRAMS OFFICE FOR VICTIMS OF CRIME SUBGRANT AWARD REPORT	The purpose of this report is to collect basic information on subgrant recipients and their programs in a manner that is convenient to report and analyze. This report must be completed in full and submitted by the state agency (grantee) within ninety (90) days from the date of the award of a subgrant to a local victim assistance program. A Subgrant Award Report must be completed for each program receiving Victims of Crime Act funding. Send the original and one (1) copy to: Office for Victims of Crime, 633 Indiana Avenue, N.W., Washington, D.C. 20531-0001.												
1. a. SUBGRANTEE AGENCY AND ADDRESS (including Zip Code): b. TELEPHONE NUMBER AND AREA CODE: c. CONGRESSIONAL DISTRICT:		2. FEDERAL GRANT NUMBER: 3. PURPOSE OF VOCA SUBGRANT AWARD: <i>(Check one)</i> a. <input type="checkbox"/> START UP A NEW VICTIM SERVICES PROJECT b. <input type="checkbox"/> CONTINUE A VOCA FUNDED VICTIM PROJECT FUNDED IN A PREVIOUS YEAR c. <input type="checkbox"/> EXPAND OR ENHANCE AN EXISTING PROJECT NOT FUNDED BY VOCA IN THE PREVIOUS YEAR d. <input type="checkbox"/> START UP A NEW NATIVE AMERICAN VICTIM SERVICES PROJECT e. <input type="checkbox"/> EXPAND OR ENHANCE AN EXISTING NATIVE AMERICAN PROJECT												
4. a. CRIME VICTIM ASSISTANCE FUNDS AWARDED: \$ _____ b. STATE AWARD NUMBER: _____ c. PROJECT BEGIN DATE: _____ d. PROJECT END DATE: _____		5. SUBGRANT MATCH <i>(Financial support from other sources)</i> : a. VALUE OF IN-KIND MATCH: \$ _____ b. CASH MATCH: \$ _____ c. TOTAL MATCH: \$ _____												
6. THESE VOCA FUNDS WILL PRIMARILY BE USED TO: <i>(Check one)</i> a. <input type="checkbox"/> EXPAND SERVICES INTO A NEW GEOGRAPHIC AREA b. <input type="checkbox"/> OFFER NEW TYPES OF SERVICES c. <input type="checkbox"/> SERVE ADDITIONAL VICTIM POPULATIONS d. <input type="checkbox"/> CONTINUE EXISTING SERVICES TO CRIME VICTIMS e. <input type="checkbox"/> OTHER		7. FOR THIS VICTIM SERVICES PROGRAM INDICATE: a. NUMBER OF PAID _____ <i>(Full-time equivalents)</i> b. HAS THE VICTIM SERVICES PROGRAM RECEIVED A VOLUNTEER WAIVER? 1. <input type="checkbox"/> YES 2. <input type="checkbox"/> NO 2. IF NO, INDICATE THE NUMBER OF VOLUNTEER STAFF _____ <i>(Full-time equivalents)</i>												
8. IDENTIFY ANY OR ALL OF THE VOCA GRANT THAT WILL BE USED TO MEET THE PRIORITY AND UNDERSERVED REQUIREMENTS a. CHILD ABUSE \$ _____ b. DOMESTIC VIOLENCE \$ _____ c. SEXUAL ASSAULT \$ _____ d. UNDERSERVED \$ _____ 1. DUI/DWI CRASHES \$ _____ 2. SURVIVOR OF HOMICIDE VICTIMS \$ _____ 3. ASSAULT \$ _____ 4. ADULTS MOLESTED AS CHILDREN \$ _____ 5. ELDER ABUSE \$ _____ 6. ROBBERY \$ _____ 7. OTHER VIOLENT CRIMES \$ _____		9. TYPE OF IMPLEMENTING AGENCY <i>(Check the appropriate boxes)</i> a. <input type="checkbox"/> CRIMINAL JUSTICE-GOVERNMENT: 1. <input type="checkbox"/> LAW ENFORCEMENT 4. <input type="checkbox"/> COURT 2. <input type="checkbox"/> PROSECUTION 5. <input type="checkbox"/> CORRECTIONS 3. <input type="checkbox"/> PROBATION 6. <input type="checkbox"/> OTHER b. <input type="checkbox"/> NONCRIMINAL JUSTICE-GOVERNMENT: 1. <input type="checkbox"/> SOCIAL SERVICES 4. <input type="checkbox"/> HOSPITAL 2. <input type="checkbox"/> MENTAL HEALTH 5. <input type="checkbox"/> CORRECTIONS 3. <input type="checkbox"/> PUBLIC HOUSING c. <input type="checkbox"/> PRIVATE NON-PROFIT: 1. <input type="checkbox"/> HOSPITAL 4. <input type="checkbox"/> SHELTER 2. <input type="checkbox"/> RAPE CRISIS 5. <input type="checkbox"/> MENTAL HEALTH AGENCY 3. <input type="checkbox"/> RELIGIOUS ORGANIZATION 6. <input type="checkbox"/> OTHER d. <input type="checkbox"/> NATIVE AMERICAN TRIBE OR ORGANIZATION: 1. <input type="checkbox"/> ON RESERVATION 2. <input type="checkbox"/> OFF RESERVATION e. <input type="checkbox"/> OTHER:												
10. PLEASE PROVIDE THE TOTAL AMOUNTS OF FUNDING ALLOCATED TO VICTIM SERVICES BASED ON THE SUBGRANTEE'S CURRENT FISCAL YEAR BUDGET <table border="1" style="width: 100%; border-collapse: collapse; font-size: small;"> <thead> <tr> <th style="width: 60%;">FUNDING SOURCES</th> <th style="width: 40%;">CURRENT YEAR</th> </tr> </thead> <tbody> <tr> <td>a. FEDERAL <i>(Excluding VOCA)</i></td> <td>\$ _____</td> </tr> <tr> <td>b. VOCA FUNDS</td> <td>\$ _____</td> </tr> <tr> <td>c. STATE</td> <td>\$ _____</td> </tr> <tr> <td>d. LOCAL</td> <td>\$ _____</td> </tr> <tr> <td>e. OTHER</td> <td>\$ _____</td> </tr> </tbody> </table>		FUNDING SOURCES	CURRENT YEAR	a. FEDERAL <i>(Excluding VOCA)</i>	\$ _____	b. VOCA FUNDS	\$ _____	c. STATE	\$ _____	d. LOCAL	\$ _____	e. OTHER	\$ _____	11. IDENTIFY THE VICTIMS TO BE SERVED THROUGH THIS VOCA-FUNDED PROJECT <i>(VOCA grant plus Match)</i> BY CHECKING THE TYPE OF CRIME(S) a. <input type="checkbox"/> CHILD PHYSICAL ABUSE b. <input checked="" type="checkbox"/> CHILD SEXUAL ABUSE c. <input type="checkbox"/> DUI/DWI CRASHES d. <input type="checkbox"/> DOMESTIC VIOLENCE e. <input checked="" type="checkbox"/> ADULT SEXUAL ASSAULT f. <input type="checkbox"/> ELDER g. <input checked="" type="checkbox"/> ADULTS MOLESTED AS CHILDREN h. <input type="checkbox"/> SURVIVORS OF HOMICIDE VICTIMS i. <input type="checkbox"/> ROBBERY j. <input type="checkbox"/> ASSAULT k. <input type="checkbox"/> OTHER VIOLENT CRIMES l. <input type="checkbox"/> OTHER
FUNDING SOURCES	CURRENT YEAR													
a. FEDERAL <i>(Excluding VOCA)</i>	\$ _____													
b. VOCA FUNDS	\$ _____													
c. STATE	\$ _____													
d. LOCAL	\$ _____													
e. OTHER	\$ _____													
12. CHECK THE SERVICES TO BE PROVIDED BY THIS VOCA-FUNDED PROJECT <i>(VOCA grant plus Match)</i> a. <input checked="" type="checkbox"/> CRISIS COUNSELING b. <input type="checkbox"/> FOLLOW-UP CONTACT c. <input type="checkbox"/> THERAPY d. <input type="checkbox"/> GROUP TREATMENT e. <input checked="" type="checkbox"/> CRISIS HOTLINE COUNSELING f. <input type="checkbox"/> SHELTER/SAFE HOUSE g. <input checked="" type="checkbox"/> INFORMATION REFERRAL <i>(in-person)</i> h. <input checked="" type="checkbox"/> CRIMINAL JUSTICE SUPPORT/ADVOCACY i. <input type="checkbox"/> EMERGENCY FINANCIAL ASSISTANCE j. <input checked="" type="checkbox"/> EMERGENCY LEGAL ADVOCACY k. <input checked="" type="checkbox"/> ASSISTANCE IN FILING COMPENSATION CLAIMS l. <input checked="" type="checkbox"/> PERSONAL ADVOCACY m. <input checked="" type="checkbox"/> TELEPHONE CONTACTS <i>(information and referral)</i> n. <input checked="" type="checkbox"/> OTHER: MEDICAL ADVOCACY														

Definitions:

The following words are defined to provide consistency in completing the Subgrant Award Report Form.

Child – A person under the age of 18 or as otherwise defined by State law.

Elder Abuse – Abuse perpetrated by a caretaker upon an elderly individual who depends on others for support and assistance.

Victim Services Program – All services and activities offered on behalf of victims of crime, including the VOCA grant and match.

VOCA – Funded Project – VOCA funds plus match

1. a. Provide the name and a two-line address of the agency receiving the VOCA funds. This item refers to the agency providing the direct services to victims of crime, not a pass-through or conduit agency.
- b. Provide the area code and telephone number.
- c. List the Congressional District and any other District(s) affected by the VOCA-funded program and project.
2. Provide the Federal grant award number from which this subgrant is made. This number can be found in “Item 4” of the OJB Award document, Form 4000/2. Note: If funds are awarded from more than one federal VOCA grant award to the victim agency, a Subgrant Award Report must be completed and submitted for each award.
3. Check the appropriate boxes that best describe the agency listed in Item 1.
4. Provide the total dollar amount of VOCA funds awarded. Do not report sums less than one dollar.
 - a. Provide the State award number assigned to this VOCA award. Note: Each number must be different.
 - b. Indicate the date the VOCA-funded project begins.
5. Provide the subgrant match (Financial support from other sources).
 - a. Provide the value of the in-kind match.
 - b. Provide the value of the cash match.
 - c. Indicate the total match available to this VOCA-funded project. Note: Do not report sums less than one dollar.

All VOCA awards must be matched (20 percent), either with in-kind or cash match. Match must run concurrently with the VOCA-funded project and must be designated exclusively for direct victim services as determined by VOCA. No Federal funds may be used to match this VOCA subgrant. This is computed by dividing the amount of the award from item 4.a. by .80 and subtracting the amount of the award from the figure obtained. (For example, a \$30,000 award divided by .80 equals \$37,500, less \$30,000 award equals \$7,500 match.)

6. Check the box that indicates how the VOCA funds will, primarily, be used. If it will be used equally for two or more items, select “other”.
7. Within the victim services program, which includes the VOCA funds and match, indicate the number of paid staff (7a.) and whether or not a volunteer waiver has been given (7b.). If “No”, indicate the number of volunteer staff. Use full-time equivalents when responding to these questions and round fractions to the nearest whole number. These numbers may be estimated or prorated.
8. Indicate the amount of VOCA funds that are allocated to the priority and underserved victims of crime.
9. Check the appropriate boxes that best describe the agency listed in item 1.
10. Report the total budget available to the victim services program by source of funding. Do not report the entire agency budget, unless the entire budget is devoted to victim services. For example, if VOCA funds are awarded to support a victim advocate unit in a prosecutor’s office, then only report the budget for the victim advocate unit. Note: **do not include in-kind match.** Do not report sums less than one dollar.

11. Check the box(es) that best identify type(s) of victims the VOCA-funded project will serve. “Other” in this category refers to victims of non-violent crime, i.e., burglary, white collar, etc. Please specify.
12. Check the box(es) that best identifies the types of services or activities that will be provided by the VOCA-funded project, as described below. Note: Report only those services actually provided by the VOCA-funded project. Do not report services offered by another agency.

Crisis Counseling – refers to in-person crisis intervention, emotional support, and guidance and counseling provided by advocates, counselors, mental health professionals, or peers. Such counseling may occur at the scene of a crime, immediately after a crime, or be provided on an on-going basis.

Follow-up Contact – refers to in-person contacts, telephone contacts and written communications with victims to offer emotional support, provide empathetic listening, check on a victim’s progress, etc.

Therapy – refers to intensive professional psychological and or psychiatric treatment for individuals, couples, and family members related to counseling to provide emotional support in crisis arising from the occurrence of crime. This includes the evaluation of mental health needs, as well as the actual delivery of psychotherapy.

Group Treatment – refers to the coordination and provision of supportive group activities and includes self-help, peer, social support, etc.

Crisis Hotline Counseling – typically refers to the operation of a 24-hour telephone services, 7 days a week, which provides counseling, guidance, emotional support, information and referral, etc.

Shelter/Safe House – refers to offering short-and long-term housing and related support services to victims and families following victimization.

Information and Referral (in person) – refers to in-person contacts with victims during which time services and available support are identified.

Criminal Justice Support/Advocacy – refers to support, assistance, and advocacy provided to victims at any stage of the criminal justice process, to include post-sentencing services and support.

Emergency Financial Assistance – refers to cash outlays for transportation, food, clothing, emergency housing, etc.

Emergency Legal Advocacy – refers to the filing of temporary restraining orders, injunctions, and other protective orders, elder abuse petitions, and child abuse petitions but does *not* include criminal prosecution or the employment of attorneys for non-emergency purposes such as custody disputes, civil suits, etc.

Assistance in Filing Compensation Claims – includes making victims aware of the availability of crime victim compensation, assisting the victim in completing the required forms, gathering the needed documentation, etc. It may also include follow-up contact with the victim compensation agency on behalf of the victim.

Personal Advocacy – refers to assisting victims in securing rights, remedies and services from other agencies; locating emergency financial assistance, intervening with employers, creditors, and others on behalf of the victim; assisting in filing for losses covered by public and private insurance programs including workman’s compensation, unemployment benefits, welfare, etc.; accompanying the victim to the hospital, etc.

Telephone Contacts – refers to contacts with victims during which time services and available support are identified.

Other – refers to other VOCA allowable services and activities not listed.

Certification of Non-Supplanting

Recipient Name and Address:

Grant Title: Victims of Crime Assistance Program

Grant Number: 2009-VA-GX-0068

Grant Award Amount

Contact Person Name/Title:

Phone Number:

I certify that federal Victims of Crime Act (VOCA) victim assistance funds will be disbursed by the contractor for the provision of services to victims of crime in accordance with the contract.

I further certify that no VOCA funds will be used to supplant/replace state, federal, or other funds that have been appropriated for the same purpose services and otherwise be available and obligated for crime victim services that are eligible for VOCA funding.

I also understand that violation of the non-supplantation requirement can result in a range of penalties, including suspension of future funds under this grant, recoupment of monies provided under this grant, and civil and/or criminal penalties.

Please send the completed form to:

Stephanie Condon, Program Manager

Office of Crime Victims Advocacy

P.O. Box 48304, Olympia, WA 98504-8304

Print or type Name and Title	Signature	Date

OMB Approval No. 1121-0140 Expiration Date: 01/31/06

Equal Employment Opportunity Plan (EEOP) Certification

Recipient Name and Address:

Grant Title: **Victims of Crime Assistance Program**Grant Number: **2009-VA-GX-0068**

Grant Award Amount:

Contact Person Name/Title:

Phone Number:

Federal regulations require recipients of financial assistance from the Office of Justice Programs (OJP), its component agencies, and the Office of Community Oriented Policing Services (COPS) to prepare, maintain on file, submit to OJP for review, and implement an Equal Employment Opportunity Plan (EEOP) in accordance with 28 CFR Sections 42.301-.308. The regulations exempt some recipients from all of the EEOP requirements. Other recipients, according to the regulations, must prepare, maintain on file and implement an EEOP, but they do not need to submit the EEOP to OJP for review. Recipients that claim a complete exemption from the EEOP requirement must complete Section A below. Recipients that claim the limited exemption from the submission requirement must complete Section B below. A recipient should complete either Section A or Section B, not both. If a recipient receives multiple OJP or COPS grants, please complete a form for each grant, ensuring that any EEOP recipient certifies as completed and on file (if applicable) has been prepared within two years of the latest grant.

Please send the completed form to: Stephanie Condon, Program Manager

Office of Crime Victims Advocacy

P.O. Box 48304, Olympia, WA 98504-8304

Section A – Declaration of Claiming Complete Exemption from the EEOP Requirement. Please check all boxes that apply.

- ☐ Recipient has less than 50 employees ☐ Recipient is an Indian Tribe ☐ Recipient is a non-profit organization
- ☐ Recipient is an educational institution ☐ Recipient is a medical institution ☐ Recipient's award is less than \$25,000

I, _____ [responsible official], certify that _____ [recipient] is not required to prepare an EEOP for the reason(s) checked above, pursuant to 28 CFR Sections 42.302. I further certify that _____ [recipient] will comply with the applicable Federal civil rights laws that prohibit discrimination in employment and in the delivery of services.

Print or type Name and Title	Signature	Date

Section B – Declaration Claiming Exemption from the EEOP Submission Requirement and Certifying that an EEOP is on File for Review.

If a recipient agency has 50 or more employees and is receiving a single award or subaward for \$25,000 or more, but less than \$500,000, then the recipient agency does not have to submit an EEOP for review as long as it certifies the following (42 CFR Section 42.305):

I, _____ [responsible official], certify that _____ [recipient], which has 50 or more employees and is receiving a single award or subaward for \$25,000 or more, but less than \$500,000, has formulated an EEOP in accordance with 28 CFR Section 42.301, et. seq., subpart E. I further certify that the EEOP has been formulated and signed into effect within the past two years by the proper authority and that it is available for review. The EEOP is on file in the office of _____ [organization], at _____ [address], for review by the public and employees or for review or audit by officials of the relevant state planning agency or the Office for Civil Rights, Office of Justice Programs, U.S. Department of Justice, as required by relevant laws and regulations.

Print or type Name and Title	Signature	Date

ATTACHMENT F

Audit Requirements – Information

Audit Costs

Agencies that are subject to A-133 audit requirements may allocate a pro-rated portion of audit costs to the goods and services portion of the budget. For agencies not subject to A-133 audit requirements, audit costs must be allocated to indirect/overhead.

AUDIT

A. General Requirements

Grantees are to procure audit services based on the following guidelines.

The Grantee shall maintain its records and accounts so as to facilitate the audit requirement and shall ensure that Subgrantees also maintain auditable records.

The Grantee is responsible for any audit exceptions incurred by its own organization or that of its Subgrantees.

The Department of Commerce reserves the right to recover from the Grantee all disallowed costs resulting from the audit.

As applicable, Grantees required to have an audit must ensure the audits are performed in accordance with Generally Accepted Auditing Standards (GAAS); Government Auditing Standards (the Revised Yellow Book) developed by the Comptroller General.

Responses to any unresolved management findings are disallowed or questioned costs shall be included with the audit report. The Grantee must respond to the Department of Commerce requests for information or corrective action concerning audit issues within thirty (30) days of the date of request.

B. Federal Funds Requirements-OBM Circular A-133 Audits of States, Local Governments and Non-Profit Organizations

Grantees expending \$500,000 or more in a fiscal year in federal funds from all sources, direct and indirect, are required to have an audit conducted in accordance with Office of Management and Budget (OMB) Revised Circular A-133 “Audits of States, Local Governments, and Non-Profit Organizations.” Revised OMB A-133 requires the Grantees to provide the auditor with a schedule of Federal Expenditure for the fiscal

year(s) being audited. The Schedule of State Financial Assistance must be included. Both schedules include:

- Grantor agency name
- Federal agency
- Federal program name
- Other identifying contract numbers
- Catalog of Federal Domestic Assistance (CFDA) number
- Grantor contract number
- Total award amount including amendments (total grant award)
- Beginning balance
- Current year revenues
- Current year expenditures
- Ending balance
- Program total

If the Grantee is a state or local government entity, the Office of the State Auditor shall conduct the audit. Audits of non-profit organizations are to be conducted by a certified public accountant selected by the Grantee in accordance with OMB Circular A-110 “Uniform Administrative Requirements for Grants and Agreements with Institutions of Higher Education, Hospitals, and Other Non-Profit Organizations.”

The Grantee shall include the above audit requirements in any subgrants.

In any case, the Grantee’s financial records must be available for review by the Department of Commerce.

C. State Funds Requirements

Grantees expending \$100,000 or more in total state funds in a fiscal year must have a financial audit as defined by Government Auditing Standards (The Revised Yellow Book) and according to Generally Accepted Auditing Standards (GAAS). The Schedule of State Financial Assistance must be included. The schedule includes:

- Grantor agency name
- State program name
- BARS account number
- Grantor
- Department of Commerce Grant number
- Grant award amount including amendments (total grant award)
- Beginning balance
- Current year revenues
- Current year expenditures
- Ending balance
- Program total

If the Grantee is a state or local government entity, the Office of the State Auditor shall conduct the audit. Audits of non-profit organizations are to be conducted by a certified public accountant selected by the Grantee.

The Grantee shall include the above audit requirements in any subcontracts.

In any case, the Grantee's financial records must be available for review by the Department of Commerce.

D. Documentation Requirements

The Grantee must send a copy of any required audit Reporting Package as described in OMB Circular A-133, Part C, Section 320(c) no later than nine (9) months after the end of the Grantee's fiscal year(s) to:

Department of Commerce
ATTN: Audit Review and Resolution Office
906 Columbia Street SW, Fifth Floor
PO Box 48300
Olympia, WA 98504-8300

In addition to sending a copy of the audit, when applicable, the Grantee must include:

- Corrective action plan for audit findings within three (3) months of the audit being received by the Department of Commerce.
- Copy of the Management Letter

ATTACHMENT G APPLICATION CHECKLIST

**DEPARTMENT OF COMMERCE
OFFICE OF CRIME VICTIMS ADVOCACY**

**APPLICATION FOR FUNDS
SEXUAL ASSAULT CORE SERVICES
Washington State FY 2011 (July 1, 2010 - June 30, 2011)**

APPLICATION DUE DATE: May 3, 2010

- ☐ APPLICATION
- ☐ AGENCY/ORGANIZATION INFORMATION
- ☐ PREVENTION ACTIVITIES INFORMATION
- ☐ BUDGET FORM (Attachment B)
- ☐ SUBGRANT AWARD REPORT (Attachment C)
1 (a-please include zip code + the 4 digit suffix, b, c), 3, 6, 7 (a, b) and 9 filled in only.
- ☐ CERTIFICATION OF NON-SUPPLANTING (Attachment D)
- ☐ EQUAL EMPLOYMENT OPPORTUNITY PLAN (EEOP)
CERTIFICATION (Attachment E)

Note: This checklist is for your convenience and does not need to be included with your proposal.